



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Ravi Chandran and Daniel J. Marchok

Application No.: 10/019,615

Group: 2626

371(c) Date: May 28, 2002

Examiner: James S. Wozniak

Confirmation No.: 7963

For: Coded Domain Echo Control

| | |
|--|------------------------|
| CERTIFICATE OF MAILING OR TRANSMISSION | |
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on: | |
| 8-3-09 | <i>Jennifer Torpey</i> |
| Date | Signature |
| <i>Jennifer Torpey</i> | |
| Typed or printed name of person signing certificate | |

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment and Supplemental Information Disclosure Statement for filing in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- ☐ A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

The claims fee has been calculated as shown below:

| | | | | | SMALL ENTITY | | OTHER THAN SMALL ENTITY | | |
|--|----------------------------------|-------|---------------------------------|---------------|--------------|------------|-------------------------|--------------|------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDIT. FEE | OR | RATE | ADDIT. FEE |
| TOTAL | 56 | MINUS | * 62 | 0 | X \$ 26 | \$ | | X \$52 | \$ |
| INDEP | 6 | MINUS | ** 6 | 0 | X \$110 | \$ | | X \$220 | \$ |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | | + | \$195 | \$ | + | \$390 |
| | | | | | TOTAL = \$ 0 | | | TOTAL = \$ 0 | |

* not fewer than 20
** not fewer than 3

The Application Size Fee has been calculated as shown below:

(Effective for cases filed on or after December 8, 2004)

| Actual Sheets (Including current amendment) | Highest No. of Sheets Paid For (At least 100) | No. of Additional Units Required (Increments of 50 sheets) | SMALL ENTITY | | OTHER THAN SMALL ENTITY | | Payment Sufficient for up to [] Sheets |
|---|---|--|--------------|-------------------|-------------------------|-------------------|---|
| | | | Rate | Total Amount Owed | Rate | Total Amount Owed | |
| | | | X \$135 | \$[] | X \$270 | \$[] | |

Petition for Extension of Time

- ☒ Applicants hereby petition to extend the time to respond to the Office Action dated February 2, 2009 for three months from May 2, 2009 to August 2, 2009. The appropriate fee is set forth below.
- ☐ [For action-specific language in an extension of time, select the appropriate option from the Firm Templates]

| | | |
|--------------------------|--|----------|
| <input type="checkbox"/> | Petition for [] month Extension of Time | \$ _____ |
| <input type="checkbox"/> | Claims Fee | \$ _____ |
| <input type="checkbox"/> | Application Size Fee | \$ _____ |
| <input type="checkbox"/> | Other Fees: | _____ |
| | | \$ _____ |
| | | \$ _____ |
| | TOTAL: | \$ _____ |

| | | |
|-------------------------------------|--|------------|
| <input checked="" type="checkbox"/> | Petition for three month Extension of Time | \$ 1110.00 |
| <input type="checkbox"/> | Claims Fee | \$ _____ |
| <input type="checkbox"/> | Application Size Fee | \$ _____ |
| <input checked="" type="checkbox"/> | Other Fees: | _____ |
| | Information Disclosure Statement fee | \$ 180.00 |
| | | \$ _____ |
| | | _____ |
| | TOTAL: | \$ 1290.00 |

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Dated: 8/3/09